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CONFIRMATION NO. 6447

|                             |                                       |              |                        |  |
|-----------------------------|---------------------------------------|--------------|------------------------|--|
| SERIAL NUMBER<br>10/025,199 | FILING DATE<br>12/18/2001<br><br>RULE | CLASS<br>514 | GROUP ART UNIT<br>1636 | ATTORNEY<br>DOCKET NO.<br>FHCC:009US/SLH |
|-----------------------------|---------------------------------------|--------------|------------------------|--|

## APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\*** *DS*

This appln claims benefit of 60/257,142 12/20/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *DS*

*NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 02/14/2002

|  |          |         |        |             |
|--|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and<br>Acknowledged <i>DS</i><br>Examiner's Signature   | WA       | 4       | 30     | 2           |
| <i>DS</i><br>Initials  |          |         |        |             |

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## TITLE

Gene transfer in chicken bursal stem cells

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|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>525 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue ) |
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